

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of

Jon Opsal et al.

Application No.: 10/658,176

Filed: September 9, 2003

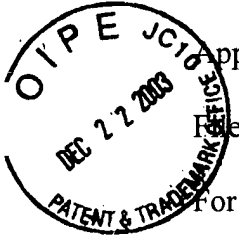
For: CRITICAL DIMENSION ANALYSIS  
WITH SIMULTANEOUS MULTIPLE  
ANGLE OF INCIDENCE  
MEASUREMENTS

Group Art Unit: 2877

Examiner: Unknown

**PRELIMINARY AMENDMENT**

121 Spear Street, Suite 290  
San Francisco, CA 94105  
(415) 512-1312



M/S NON-FEE AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited  
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Box 1450, Alexandria, VA 22313-1450 on Dec. 17, 2003.  
STALLMAN & POLLOCK LLP

Dated: 12/17/2003By: Georgia K. Stith

Georgia K. Stith

Sir:

Please amend the above-identified application as follows:

**Amendments to the Specification** begin on page 2 of this paper.**Remarks/Arguments** begin on page 3 of this paper.



STALLMAN & POLLOCK LLP  
121 Spear Street, Suite 290  
San Francisco, CA 94105  
(415) 512-1312

In re Patent Application of: Jon Opsal et al.

Atty Docket No. TWI-12030

Application No.: 10/658,176

Filed: September 9, 2003

For: CRITICAL DIMENSION ANALYSIS WITH SIMULTANEOUS MULTIPLE ANGLE OF INCIDENCE MEASUREMENTS

M/S NON-FEE AMENDMENT

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Sir:

Transmittal herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL	7	MINUS	20	0	x \$18 =	\$0
INDEP.	1	MINUS	3	0	x \$86 =	\$0
FIRST PRESENTATION OF MULTIPLE DEP CLAIMS					+ \$290	\$0
					TOTAL	\$0

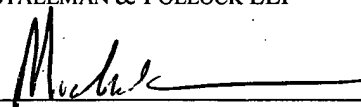
Small Entity 50% Filing Fee Reduction (if applicable) \$0

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3  
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.  
\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.)

- ☒ No additional fee is required.
- ☐ A check in the amount of \$\_\_\_\_\_ is attached.
- ☒ Please charge any additional fees, including any fees necessary for extensions of time or credit overpayment to Deposit Account No. 50-1703, under Order No. TWI-12030.  
A duplicate copy of this sheet is enclosed.
- ☐ Petition for extension of time. The undersigned attorney of record hereby petitions for an extension of time pursuant to 37 C.F.R. § 1.136(a), as may be required, to file this response.

STALLMAN & POLLOCK LLP

Dated: December 16, 2003

By:   
Michael A. Stallman (Reg. No. 29,444)  
Attorneys for Applicant(s)

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Dated: December 17, 2003

By:   
Georgia K. Smith